

## TRANSCRIPT OF AUDIO FILE:

### **2015-02-24 13.02 MINORITY AIDS INITIATIVE CONTINUUM OF CARE (MAI-CoC) ORIENTATION WEBINAR FOR TRAINING AND TECHNICAL ASSISTANCE**

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#### **BEGIN TRANSCRIPT:**

AUTO VOICE: The broadcast has now started. Attendees are in “listen only” mode.

ROSALIE: Good afternoon everyone. My name is Rosalie and I'd like to welcome you to the Minority AIDS Initiative Continuum of Care Orientation Webinar for Training and Technical Assistance. This Webinar is brought to you by the SAMHSA-HRSA Center for Integrated Health Solutions. Before we get started I'd like to draw your attention to some important Webinar logistics. Today's Webinar is being recorded and an audio version of the entire Webinar and a PDF of the presentation will be available on the website within 48 hours. [00:00:47]

You are currently in “listen only”. If you are listening on your phone please remember to enter your audio pin number from the control panel on the right of your screen onto your phone's keypad. You can send questions to the speakers at any time during the Webinar. Simply type in your question into the dialogue box to the right of your screen and send it to the organizer.

Depending on the question, we may respond back to you or save it for the end. We will answer as many of your questions as time allows. If you experience difficulties at any point during the Webinar, please call Citrix Text Support at 888-259-8414. Again, that's 888-259-8414. And now I'd like to turn for the presentation to our first presenter, Jake Bowling. [00:01:36]

JAKE: Thank you Rose and welcome each of you to the MAI-CoC Training and Technical Assistance Orientation. I'm Jake Bowling, the Director of Practices Improvement at the National Council for Behavioral Health and the MAI-CoC Task (unclear) here at the Center for Integrated Health Solutions. Congratulations on your MAI-CoC awards.

Today's orientation is designed with a few objectives (unclear). First, we hope that you'll increase your knowledge of the (unclear) of TTA, Training and Technical Assistance available to you through the SAMHSA-HRSA Health Solutions. Second, we hope that you learn specifically

how to ask for the training and assistance and third, we hope to make you aware of the importance of the training and technical assistance activities and that stuff.

Before we talk about the training and technical assistance you can expect through CIHS, I wanted to take a few minutes to describe the relationship between the different entities that are involved in the provision of training and technical assistance to MAI-CoC grantees. As you can see and as you know, SAMHSA and the Substance Abuse Services Administration is providing both the program funding for the MAI-CoC program as well as support for your grants projects officers and grants management support. [00:02:56]

SAMHSA has contracted with the SAMHSA-HRSA Center for Integrated Health Solutions which is housed at the National Council for Behavioral Health to provide training and technical assistance to MAI-CoC grantees. And as you know, the goal of this constellation of support is integrated behavioral health and HIV and hepatitis prevention and treatment services. We'll talk a bit more later about CIHS's history of providing TTA to organizations or integrating behavioral health and continuity of care. And we'll speak more about the MayaTech Corporation, who many of you already know has joined the CIHS team and will be working with us to provide high quality training and technical assistance through the MAI-CoC grant program.

The next slide really demonstrates the national scope of the MAI-CoC program. We'll share the names of your fellow grantees that have known that but as you can see nine out of the ten HHS regions had MAI-CoC grantees. There are 34 grantees spanning 17 different states. This map is also posted on the CIHS website for you. Although we also wanted to make a correction to the image on the map. As you can see, Pennsylvania is highlighted and that's an error. The two grantees in that region are from Delaware and Maryland. So forgive us our error and we'll be making that change and uploading the most recent map to the CIHS website which we will talk a little bit more about in a moment. [00:04:30]

Here is a listing of the MAI-CoC grantees with their GPOs and corresponding TTA coordinators. As I said a few slides ago, my tech is on the CIHS team for this project so we'll be coordinating the provision of TTA among other roles in the project. And so they'll share some information with you on how to access TA, but this part is a great reference so you know the GPO and TTA coordinator assigned to your organization. So at this time I would like to introduce to you, Gretchen Vaughn, the TTA Lead, from the MayaTech Corporation and Victor Ramirez, TTA Coordinator, from MayaTech to speak more about the training and technical assistance that you can expect. [00:05:14]

GRETCHEN: Hello everybody. This is Gretchen Vaughn. I'm the TTA Lead for the MayaTech Corporation and I also want to allow my colleague from MayaTech, Victor, to introduce himself. (Pause) Well, I guess we'll do that later. We want to talk about what the variety of training and technical assistance activities are available to you. First and foremost we have available, site specific visits. And during these visits you'll have the opportunity for consultation face to face with your project officer as well as the CIHS subject matter experts and staff. We'll be providing training and technical assistance and planning on site and CIHS will coordinate in conjunction with the project officer and grantee, the content of that site visit TA based on the specific technical assistance needs of each site.

The second kind of TA and training that we're providing is the site specific e-mail and telephonic TA. This is consultation by phone with access to content experts. This TA is again, initiated with a request through your project officer to address a specific concern, a specific need or content area.

This third kind of technical assistance that we're really excited about is cross-site training and technical assistance. This will be group calls and web-based meeting. We'll organize based on affinity groups such as an evaluator group, or project program director group, or content-specific groups to provide technical assistance. We're thinking of these groups more as a community of practice where grantees will be able to share their unique innovations and expertise as well as perhaps some regional issues that are of concern to grantees from a specific region. The cross-site TA survey will also be disseminated so that we can get ideas from you, as grantees, of what contact areas you'd like to have as part of that cross-site TA. Next slide. [00:08:04]

We also will be providing monthly Webinars. Similar to this Webinar there will be 60 to 90 minute Webinars focusing on topics of interest critical to effective and efficient implementation of behavioral health and HIV service integration. We've already sent you a survey to find out what topic areas you're interested in and we've gotten some great feedback so we're really excited to be talking with the project officers and grantees about what specific monthly Webinars you'd like to have for the rest of the year. We also will be providing web-based (unclear) for the CIHS website. That website, which we'll be talking about in a little bit more detail later on, has a plethora of resources – archive Webinars, resource materials, general program information. So you can actually go to that website at any point and download the information that you're looking for. Next slide. [00:09:08]

I wanted to talk to you about some examples of specific areas where we have training and technical assistance expertise available to provide for you. Of course, clinically, we have all kinds of technical support in areas of behavioral health, co-occurring disorders, motivational (unclear), trauma, best practices, pain management, health behavior change, care coordination, medical and behavioral health, training tools, primary care and clinical guidelines and tele-medicine.

In the area of consumer education – I'm sorry, consumer engagement and peer engagement, we have resources in terms of consumer inclusion, family inclusion, peer educators, we also have community educators, recovery information, chair decision-making, wellness coaches, etc. The area of finance, course billing, self-pay, issues pertaining to Medicare and Medicaid, state-specific models, sustainability, private payers, etc.

Health information technology: data sharing, meaningful use of data. Particularly, one interest I have is allowing clinicians to make use of the data that we collect for their work. Electronic health records, patient registry, work flow, intraoperative capability across the agencies.

In terms of integrative care models, of course we have expertise in integrating behavioral care – health care into primary care; primary care into behavioral health care, bi-directional integration,

reviewing models and choosing a model that will work best for your center as well as patient-centered medical home care models. Next slide. [00:11:24]

We also have expertise from the area of operations. This is particularly important for startup activities. So talking about recruitment and retention of clients, confidentiality, dealing with organizational change, setting up contracts and MOUs, work flow, medical space guidelines, scopes of work, policies and procedures which are different from ordinary communications. Health care (unclear) and bias, discrimination in marketing. [00:12:02]

Performance management. We have assessment tools for that, data collection and management tools for that, as well as quality improvement tools that we can provide for you.

In terms of policy we have experts who can help you with information pertaining to the Affordable Care Act and federal/state policies.

Special populations we have TA assistance in cultural competency issues working with specific racial and ethnic populations, rural communities, homelessness, military and vet training, uninsured persons, persons with HIV, older adults, children and adolescents.

In terms of substance abuse: medication-assisted treatment, training, brief treatment, substance abuse prevention and treatment.

Wellness and peer support recovery, cognitive skills to avoid negative thinking, physical activity, tobacco cessation, whole health action and management training, weight management, restful sleep, diabetes management, healthy eating, service to others, wellness, HIV care models, hepatitis-HIV testing, health, risk screening, stress management and whole health self-management. [00:13:32]

In terms of work force and training, behavioral health staff and primary care, primary care staff and behavioral health care, case to care navigated training, continuing education, staff retention, graduate education, state licensure requirements and primary care staff and Behavioral Health and National Health Service Corp. (Pause) I'll now pass it on to my colleague, Victor, to talk about how to access the technical assistance. [00:14:07]

VICTOR: Thank you, Gretchen. Can everybody hear me okay? I hope so. As a matter of introduction, again, my name is Victor Ramirez. I'll be one of the two TA liaisons working with CIHS to coordinate the delivery of training and (unclear) core assistance to all the MAI-CoC grantees. The second TA liaison is Jamie Weinstein. I know that a lot of grantees have had the experience with working with MayaTech in the past and have also had the opportunity to work with Jamie and myself in the past. So for all MAI-CoC grantees we want to welcome you and for the one's we worked with in the past, we're excited to be working with you again; and for the new ones we're excited to be working with you for the first time. So I'll be talking about how to access training and technical assistance.

One thing that's very important to note is that all TA requests are made through your government project officers. There was a slide earlier in the presentation, I think it was Slide 6, that details

the assignments, so if your project officer is Jeanette (Unclear) Mills, Stephen Carrington, Kirk James, Judith (unclear), Edward Kraft or Barbara Rogers, all those TA requests will be handled by Ms. Weinstein. If your project officers are Mr. Morris (Unclear), Kareem Hamadi (sp?), (Unclear), Patricia Febrey (sp?), I'll be handling those TA requests. So the important thing here is to note that all your TA requests are made through your project officers and then once they've been approved, they are triaged to CIHS which will then – at that point Jamie or myself will then start the process of coordinating training and TA with the private (unclear) and with the grantees. [00:16:20]

Of course, the project officers are always going to be engaged and updated throughout the TA process, both at the beginning and the planning phase, during implementation and also during (unclear) and evaluating the TA. Next slide please.

What we do want you to note is that it's important for all the grantees to discuss their TA needs with TA needs with the project officer. This is very important, especially at the front end. Your project officer can help you clarify what type of TA you might need, might assist you in writing up your TA request so that we can effectively deliver the TA to you. So please discuss your TA needs with the project officer before you make the formal TA request. So grantees will complete the TA request form and send that back to their project officer. At that point the project officer will review the request and if they need to clarify anything with you, they will do so. This especially to go back to the first point – this is why it's important to discuss TA needs with your project officer on the front end so that there's got to be a lot of going back and forth to clarify your TA request.

So once your project officer approves the TA request, then at that point, the CIHS TA coordinator, either Jamie or myself, will contact you to begin planning. And the planning process can usually begin, will usually take the form of planning conference calls with the grantee, also with the project officer just to make sure that we are all on the same page on the TA to ensure needs and how it's going to be delivered. Next slide, please. [00:18:39]

We also want to show to all the grantees the use of the MAI-CoC ListServ. Some of you, most of you, have been receiving ListServ messages in the past month or so, month and a half. And the primary objective of the ListServ is to disseminate information, SAMHSA announcements, announcements from AIDS.gov, Webinar notices like this one for upcoming conferences, trainings, peer to peer, best practices and other items related to behavioral health, primary care and HIV services and hepatitis testing and vaccination integration. Everything that Gretchen spoke about, everything about Webinars, peer to peer, peer to peer training, all of that information will be disseminated to the ListServ. So please just make sure that you keep us up to date on the staff that you wish to have included on the ListServ. We can include up to five grantee staff and out of those five grantee staff – the project director, the project coordinator, and the project evaluator have to be included, or should be included.

And of course, it's up to your discretion if you want to include some of your collaborators, some of your (unclear) contractors in the grant. So if you think they should be receiving some of the information, some of the updates that will be disseminated through the ListServ, please let us know. You can contact me and my e-mail will be at the end of the slides. Or you can e-mail the

ListServ e-mail address which will be also at the end of the slides just to let us know who you wish to be included in the ListServ for your organization. And also, you know, if there is a change in staff, if there's a change in the project evaluator and once it's approved by the project officer, you can let us know and we will make the change to have the ListServ up to date. So at this point I'll pass the slides back to Jake. [00:21:20]

JAKE: Thank you so much, Victor and Gretchen, for sharing that overview of TA and how to access TA. We appreciate that. And at this time we want to share some important web resources for you through CIHS. So on CIHS's website is a wide array of training and technical assistance resources that help to improve the effectiveness, efficiency and sustainability of integrated services which ultimately, as we know, improves the health and wellness of individuals who are living with behavioral health conditions and other chronic health conditions. So feel free, at any time, to peruse our general website for materials that we've made available to our national audience for (unclear) integration. I'll just be giving some examples of those resources.

We have a section on Integrated Care Models that includes the evidence for integration, examples of integrative approaches and great tools like the standard framework for levels of integrative care which help you understand where you are on the integration continuum and then you can use it to discuss integration of SNAP and other stakeholders, creative common language around integration into organization to help you benchmark your progress toward integration, and help you explore financing, to help you clarify the division between two or more partnering organizations. So we have those and a number of other actionable tools there for your use. But in addition to that we also have a specific section of the website dedicated to MAI-CoC grantees. And I'm going to show you some screen-grabs from that website.

So I know that this is kind of small, but as you can see, on the right side there's the hyperlink to the website: [www.integration.samhsa.gov](http://www.integration.samhsa.gov) and at the bottom of the website in kind of the blue band there, on the right side it says, "I'm an MAI-CoC Grantee". And that's where you can click to access additional resources which I'll tell you a little more about. And so in the MAI-CoC online community, you'll find some tabs on the left-hand side of the screen including an overview Webinar. So right now we have a Webinar posted that SAMHSA convenes to introduce you all to the program.

And we will have additional Webinars including this one posted at that link and you'll have an alt, delete, forward, and we'll have additional resources and those could be everything from prominent government departments from whatever resources they believe we think could aid your integration efforts.

In addition, we have some paths related to our (unclear). If you need a reminder of who your past PLN and PCA coordinator are and then, and this was demonstrated here at Yale, but there will also be a tab along that left side called MAI-CoC data resources and Ilsa is going to share, Ilsa [Redinda (ph) from SAMHSA is going to share some updates and (unclear) about some data-related resources that we'll be sharing and some upcoming next steps. But I just wanted to let you know that that tab will be made available on the website and there will be a lot of great resources there related to data. And we'll continue to customize the website so it can be a really good resource for you all. [00:25:07]

So at this time we wanted to share some additional information on CIHS and the MayaTech Corporation. CIHS, SAMHSA-HRSA Integrated Health Solutions is housed at the National Council for Behavioral Health and they promote the development of integrated primary and behavioral health services to better address the needs of individuals with mental health and substance abuse conditions, whether they're seen in specialty behavioral health or primary care provider settings. CIHS is the first national home for information, experts and other resources dedicated to bidirectional integration of behavioral health and primary care and they provide training and technical assistance to over 100 community behavioral health organizations through the primary and behavioral health integration grants (unclear) from this program as well as supports community health centers and other primary care and behavioral health organizations. [00:26:06]

Now we've added MAI-CoC as another group receiving training and technical assistance through the Center for Integrated Health Solutions. And we're working with the MayaTech Corporation that has broad experience providing training and technical assistance support around substance abuse, HIV prevention, HIV care, care for minority populations, training and technical assistance to (unclear) programs, TA around evaluations, the development of materials and resources, a lot of other strong TA capacity to really provide you a robust and responsive training and technical assistance experience. We'll also be partnering with a wide array of subject matter experts in the field like SAMHSA technical assistance centers and other resources to make sure that we can bolster innovation.

And the staff of MayaTech and the MAI-CoC people will be working with Kelly Wagner, MayaTech Subcontract Manager; Gretchen Vaughn, who you just heard from, the Training and Technical Assistance Lead; Victor Ramirez and Jamie Weinstein who will be the TTA Coordinators. And as Victor shared, each SAMHSA GTL is assigned a TTA coordinator that's responsible for coordinating GTA for their grantee portfolio. [00:27:34]

So we also wanted to share some communications, contact information for you all and you'll see Victor and Jamie's e-mail addresses as well as Gretchen and Kelly's, general MAI-CoC TA e-mail address to use. They probably look familiar to many of you here on the ListServ, you know the e-mail from which the ListServ posting's from. And then also my contact information here at CIHS is listed and Laura Galbraith who is unable to be on the call but who is the Director of the SMAHSA-HRSA Center for Integrated Health Solutions. Her e-mail address is on there for your reference.

So we wanted to share some grantee's next-steps for you all today. And it looks like we're going to have a lot of time for questions which is great. So one of the most important next-steps is to contact your GPO for technical assistance. And they will share with you the documentation that you need to fill out to make a technical assistance request.

In addition, as Victor shared, if you have other folks you would like to be on the ListServ from your site, please e-mail [mai-coc-ta@mayatech.com](mailto:mai-coc-ta@mayatech.com) or you could e-mail Victor directly to make sure those individuals get on the ListServ which will serve as the central hub for information about important project activities.

And finally, stay tuned for more information about upcoming Webinars, site visits and other cross-site training and technical assistance opportunities. We've received your feedback through the training and technical assistance needs assessment and we really appreciate that feedback. We're currently analyzing that data and will reach out to you if additional information is needed. And we're eager to use that feedback to inform the TA experience is responsive to what you need and why, to integrate behavioral health for HIV and hep prevention and care services. So at this time I would like to turn it over to Ilsa who the Lead from SAMHSA who you all know quite well who would like to offer an important data-related update. Ilsa? [00:29:58]

ILSA: Hi. Can everybody hear me? Okay. Can you hear me? Thank you. Thank you, everybody for joining us today and thank you for the great overview with the specifics that each of the grant people find very helpful yesterday when the very big and important day for the kickoff for the common data platform the CDP for SAMHSA and its course is a graded program. Each of your sites, all of you, will be reporting through their common data platform center for mental health services, CMHS elections. So your tools are under the CMHS. A couple of very present concerns for us right now, a few people are having trouble getting logged in and for those who called the help desk the project should have no problem getting you in, but I think they have a bit of a backlog right now.

On a second very interesting point I want to share with you is that I believe that all of your projects when were enrolled in a training under C-STAT, if not enrolled, at least you were invited. And the C-STAT invitation was a misstep in the training protocol that's under a different mechanism than the development and the help desk. So it's very credible how that might have occurred and also that in our data system, if you guys have a C-STAT indicator as your ID number. In any case, you guys are going to be brought into the collective here at CMHS in short order. The training for this cohort for MAI-CoC exclusively, is going to be set shortly and the date that I was given was TBD for between March 9<sup>th</sup> and 13<sup>th</sup>. So I asked for a time a little bit earlier in that week. And that was put us in the front end of all of the cohorts that will receive cohort-specific training.

So whoever was able to be on the C-STAT training, nothing you learned will be, will go unused, it's just that your (unclear) for your tool will be somewhat different and not exactly what you had. I think any of the exposures to any trainings are basically supportive because you're really walking down very much the same avenue here.

Another important point is the tools for the new common data platform, the DCI, the data collection instrument is not posted now. It was posted on a training site and it may have been available earlier, but because they're developing the interface on that electronically, the tool you'll be using and all of the new programs will be using is not electronically available at this time. An attempt was made earlier to disseminate the basic DCI tool and some of you have received that as a part of another e-mail as an attachment but we'll be resending on that tool plus the eight program-specific questions and the question by question guide to all of you. And also on the CIHS website there's to be placed resources tab, it'll be an MAI-CoC data resources and will include the items that you will need for data collection under the new data collection instrument. And with that will be the questions that are specific to program, the eight questions



that will eventually, when the system is online, will go into Section H. So, as of this time, you should be able, with the use of the question by question guide, if you wish to, certainly become familiar with the tool and then you'll be ready for the training and if you already have a strong familiarity with program and other CMHS or C-STAT programs, you may use those tools. But we are completely aware of the fact that people without experience with prior CMHS (unclear) the C-STAT tools, that we're open to your questions. You'll want to talk with your GPO. And it's perfectly okay to hold off.

So that is a little bit of the recap there. And the system should go live electronically for data entry if you've already selected. The data entry should go live by March 31<sup>st</sup>. So a couple of dates have gone for that. One was March 16<sup>th</sup>. I think it was earlier this week and so it's apparent that everything should be in place by March 31<sup>st</sup> for the CMHS system to actually utilize entry.  
[00:36:13]

So in terms of annual goals and budgets I'm not sure if those can be entered yet. I just don't have that information but a discussion with GPOs would be useful for you about that. If you've been able to get in and look at the budget section you may be able to tell me if you were able to manipulate those fields. But I'm not sure that you have.

On employer goals, you're going to want to attenuate the Year One goals to be realistic in terms of the amount of time remaining until September 30<sup>th</sup> between now or whatever juncture you're in given if you've been collecting data. You want to assure that your goal that you project into this system, once we get to those fields with you will be something that's realistic for this year and then in the following years you want to take that into consideration also.

Now I think that's pretty much it as far as the data part that I have grasp of. Just as a reminder, the Rapid Testing information will still be forwarded into the secure mailbox. That's a question that's already come up a couple of times. And that will occur until you have further information. Ultimately, there should be an electronic system for entering rapid testing time data. And the rapid testing form along with the rapid testing cue by cue will shortly be posted also on the CIHS website for MAI-CoC on a data resources tab.

And then since we have another minute, finally a reminder for your continuation application which is due March 2<sup>nd</sup> and we will send everybody a quick link and a reminder on that. When you approach this task, be mindful that historically, the progress narrative has at times included more detail from the program for you to complete, you know, like targeted areas and so forth, in your program narrative update. But what we wish for you to do is simply follow the instructions as they're posted on the website right now under Continuations. You know, it's samhsa.gov grants and then continuation application. There is a supplemental information link and it holds an outline for a progress narrative. And if you follow that outline based upon your program and how your program is formulated, then we will have sufficient information about4 your progress. And it has a five-page limit. So if you approach that mindfully, understand that as you go forth into subsequent years, that you should be able to use this as a point of beginning and then build upon this and be able to put in bold what our change is in the subsequent years. So you'll end up with a narrative that is always useful for you instead of having to go back and start over completely.

There is an annual report for your project and we'll send you more information about that and that will be due October 30<sup>th</sup>. It's noted very lightly in your RSA. So there's an annual reporting point for you and that will have a format and probably a work plan. And so we'll be able to have a little time with you over the next two months to be able to put a footprint together for that and then you'll be able to respond to it and that is after the end of this grant year which ends September 30<sup>th</sup>, and then you'll have 30 days to provide that. So you'll have information on that much earlier.

I think that's it here from programs. So I want to turn that back to Jake and I am certainly here for questions, thoughts, ideas and we're getting excited about the opportunities that we have to build on. Work that's been in the field in the field in different arenas over time and to really work with you to develop what's new in different localities around HIV and hepatitis and services for people with co-occurring substance abuse, mental health disorders and for primary prevention. [00:41:38]

JAKE: Thank you so much, Ilsa, for those program-related updates and at this time we will take questions via the comment box in the right side of your screen. We have about fifteen minutes. So I will read the questions and then the appropriate team member will answer. If we don't get to your question today, we can respond to that afterwards but it looks like we have a good amount of time to address questions. And then we're grateful to have Ilsa on the line to answer any program-related questions, if needed. And actually we do have a question for you, Ilsa. And the question is, someone is asking or saying – I'm sorry, can you hear me, Ilsa?

ILSA: Yes. I see the question on my screen. Absolutely. And we have set a program up that contains some part of this, particularly about the CDP and we can resend that. And also everything to do with this data recording and also the continuation application, definitely. And you would look for that from your GPO or for a program-wide ListServ we had a ListServ – not a ListServ but like a group mail generated here at SAMHSA and I know there are two or three projects that may not have received that data on the initial send and we did leads send that to those folks. I'm still convinced I'm missing somebody in the northeastern part of the country. And you know who you are if you're on this because he e-mailed me today and I appreciated that. [00:43:42]

JAKE: Great. Thank you, Ilsa. And at this point we don't have any other questions. Oh, yes we do. So, okay, we just got another question. We're trying to log on to the CDP with this (unclear) number. I get a message that says it's not a valid number. Are these (unclear) currently in the system?

ILSA: You know, yesterday, I examined this closely with the developers and they did not finally get back to me and you know we have 34 projects and two people have asked about this. I can't know even yet if they're up there. So this is something that's being looked at here. Were you able to, was this individual able to log in?

JAKE: It looks like she was not able to log in. She just responded "no".

ILSA: Okay, you should send a note to the help desk. Do you know how to reach the help desk? Which is, they are at [cdphelpdesk@aceinfosolutions.com](mailto:cdphelpdesk@aceinfosolutions.com) and they have a phone which is 1-844-400-4237 and also 1-844-500-4237. And then –

JAKE: Great.

ILSA: Thank you.

JAKE: Go ahead.

ILSA: That's it.

JAKE: I'm sorry, I wanted to share with you that there is some conversation happening through the question box of other folks who have contacted the help desk and they have indicated that the help desk is working on it and that other grantees have experienced that as well.

ILSA: Okay.

JAKE: Yes. And there was another question about when the log in information for CDP was sent out. If you have, if someone hasn't received that log in information should they contact their GPO?

ILSA: Well, you could let me know because I can get to it more quickly that way. And then cc your GPO. [00:46:47]

JAKE: Thank you. And we have one more – for now, we have one more program-related question. You mentioned that there will be an annual report. Are there no required quarterly reports?

ILSA: That's true. There is a fiscal reporting that goes through your grant and finance offices and I think some were, at some juncture there was a question, 'did it apply to programs in terms of project activity?' And there's a quarterly report but that's a fiscal report. So for this program your progress narrative and your continuation application and you'll have one other reporting point.

JAKE: Thank you, Ilsa. And there is one more question about – it says, 'can we have a copy of the bio psycho-social form until we can get on to the CDP?

ILSA: Yes. And actually that's the form that was available before it went (unclear) yesterday and also it was in one of the attachments that was sent by the CMHS system from CDP Transitions CMHS at (unclear).com. And actually they had a note that went out Friday at 5:12 and then Monday at 9 a.m. or 9:10. I forwarded that with some additional information. And since that was yesterday this has all already changed a little bit and so that's why it's so bad reporting it because it says like we'll be able to enter data March 16<sup>th</sup>, you know, and these forms are attached. So yeah, the CDI form was attached to it. We will resend that or send it and whoever, you know, by the end of the day doesn't have it, please let us know. And these should be posted. Like you

already have these so in terms of the data resources tab for MAI-CoC, that should be up also by tomorrow or by Wednesday. Am I right?

JAKE: Yeah. Yes. We can have it up on the website within 48 hours.

ILSA: Oh, that's good. [00:49:25]

JAKE: And we have a question that asks if we can share the contact information for the CDP help desk. E-mail and phone number with grantees on this Webinar via the ListServ via the TTA ListServ.

ILSA: I think you can, but one thing you should be mindful of is this, that the person who's the project director on these grants in the field will have the ability to add users and so if you're a project director and you're able to log on, there should be posted instructions on how you can add users in your project. And so, you know, yes, you should share that but think about whether or not you can support them in the interval and as we kind of tumbled into this, absolutely, they could definitely call the help desk. And at some juncture the project directors will learn a little bit more about their ability to add people and again will be more able as GPOs to support you in that and also add people and help make changes.

This system, I have to say, I've had like probably a half an hour of productive time with it and it's really quite good. So as daunting as it seems, believe it or not it really has some good features. But we want your feedback ongoing and one we want to assure that everybody who is approved to be in this system can have the accesses that they need. And given too, none of these tools are posted in there for now and nothing can be entered electronically with regard to these new tools. So whatever it takes, we're all going to, hopefully, we'll all get there soon. [00:51:41]

JAKE: Great. Thank you. And we have another question that asks, you mentioned the new DCI will be uploaded to the website. Are you referring to the [www.integration.cancer.gov](http://www.integration.cancer.gov) website?

ILSA: I can give you two answers to that. Okay, the DCI tool will be submitted electronically, the data entry will be submitted electronically online. Once the CDP is functional. And it's not functional yet. In the interval for your reference and for your use, you'll be able to get a copy of this off of the CIA test website who are our hosts today on the resource page that was in the screenshot. So you'll have a little library of tools that are posted here for your information and use and the Q by Q will be there. And ultimately, by the end of March you'll be able to go back and enter that data that you've collected, as it were, into the electronic system that is online through the common data platform. Did that answer that question? Could that person please reply further if that was answered?

JAKE: Yeah, Ilsa. She says yes and thank you.

ILSA: Okay. Thank you. May I make a provisory reminder comment?

JAKE: Sure.

ILSA: Okay. Which has to do with the rapid testing data collection and the common data platform, the data collection instrument. You want to be sure as you move forward that everyone with whom you do an interview for the data collection instrument has a rapid testing form also associated with it with the same ID number. Those of you who participated in the rapid HIV hepatitis testing presentations in December from Health Resources Associates that Barbara analyzed and Kirk James did a walk through on the Q by Q. The importance of having a match like between a rapid testing form and everyone who's going into the data collection instrument is very important to our program. So you're going to be testing. Okay, you're going to do services and then you want, as a program, to create numbers for the testing form and the data collection instrument that are matched? So that's like, if you went forth, as you go forth, this is something to integrate into the effort early (unclear) and then again, your rapid testing form will go by the PDS to the secure mailbox and our DCI eventually will get entered electronically into the common data platform. You can see these pieces are, you know, there's numerous like facets of things that are needing to fit together and once we have, you know, when in place it's going to be fairly easy to continue. Was that helpful?

JAKE: Yes. Thank you and actually I think that there are no more questions and so I appreciate Ilsa (unclear) for joining us and also Gretchen Vaughn and Victor Ramirez, thank you so much. And Rose has been closing Webinar comments, so please stay on the line for one or two more minutes. But in the meantime if you have any additional questions or need technical assistance, please contact your GPO. So Rose, I'll hand it over to you. [00:56:37]

ROSALIE: Great. Once again, everyone, a recording of the presentation of this Webinar will be available within 48 hours on the CIHS website in the MAI-CoC grantee section which Jake mentioned earlier in the presentation. And then once you exit the Webinar you'll be asked to complete a short survey. Please be sure to offer your feedback on today's Webinar. Your input is important to us as it informs future development of CIHS Webinars and again, I would like to extend a thank you to all our presenters for joining us on today's Webinar and thank you all for joining as well. Have a great rest of the afternoon.

JAKE: Thank you. Take care.

ROSALIE: Thank you. Bye.

**END TRANSCRIPT**